

HUMAN SERVICES DEPARTMENT[441]

Notice of Intended Action

Twenty-five interested persons, a governmental subdivision, an agency or association of 25 or more persons may demand an oral presentation hereon as provided in Iowa Code section 17A.4(1)“b.”

Notice is also given to the public that the Administrative Rules Review Committee may, on its own motion or on written request by any individual or group, review this proposed action under section 17A.8(6) at a regular or special meeting where the public or interested persons may be heard.

Pursuant to the authority of Iowa Code section 249A.4, the Department of Human Services proposes to amend Chapter 78, “Amount, Duration and Scope of Medical and Remedial Services,” Chapter 79, “Other Policies Relating to Providers of Medical and Remedial Care,” and Chapter 90, “Targeted Case Management,” Iowa Administrative Code.

The proposed amendments update coverage and payment provisions for Medicaid case management services to do the following:

- Correct outdated terminology and remove language on child welfare decategorization counties that is no longer applicable.
- Clarify when contacts made by E-mail are an allowable case management activity.
- Clarify that when case management activities are provided through an assertive community treatment (ACT) program, they are not also reimbursable as targeted case management.
- Remove outdated effective dates.

These amendments do not provide for waivers in specified situations. Requests for the waiver of any rule may be submitted under the Department’s general rule on exceptions at 441—1.8(17A,217).

Any interested person may make written comments on the proposed amendments on or before March 1, 2011. Comments should be directed to Mary Ellen Imlau, Bureau of Policy Coordination, Department of Human Services, Hoover State Office Building, 1305 East Walnut Street, Des Moines, Iowa 50319-0114. Comments may be sent by fax to (515)281-4980 or by E-mail to policyanalysis@dhs.state.ia.us.

These amendments are intended to implement Iowa Code section 249A.4.

The following amendments are proposed.

ITEM 1. Rescind rule 441—78.33(249A) and adopt the following new rule in lieu thereof:

441—78.33(249A) Case management services. Payment will be approved for targeted case management services that are provided pursuant to 441—Chapter 90 to:

1. Members who are 18 years of age or over and have a primary diagnosis of mental retardation, developmental disabilities, or chronic mental illness as defined in rule 441—90.1(249A).
2. Members who are under 18 years of age and are receiving services under the HCBS intellectual disability waiver or children’s mental health waiver.

This rule is intended to implement Iowa Code section 249A.4.

ITEM 2. Amend paragraph **79.1(1)“d”** as follows:

d. Fee for service with cost settlement. ~~Effective July 1, 2009, providers~~ Providers of case management services shall be reimbursed on the basis of a payment rate for a 15-minute unit of service based on reasonable and proper costs for service provision. The fee will be determined by the department with advice and consultation from the appropriate professional group and will reflect the amount of resources involved in service provision.

(1) to (3) No change.

ITEM 3. Amend subparagraph **79.1(24)“a”(1)** as follows:

- (1) ~~Effective July 1, 2009, a~~ A unit of case management is 15 minutes.

ITEM 4. Amend subparagraph **90.5(1)“e”(2)** as follows:

(2) The case manager shall have at least one contact per month with the member, the member’s legally authorized representative, the member’s family, service providers, or other entities or individuals. This contact may be face-to-face or by telephone. The contact may also be by written communication, including letters, E-mail, and fax, when the written communication directly pertains to the needs of the member. E-mail contacts are allowed only when other means of communication are not feasible for the member, representative or family and the necessity for E-mail communication is documented in the member’s comprehensive service plan. A copy of any written communication must be maintained in the case file. When E-mail communication is used, there must be clear two-way communication in the member’s record showing an exchange of information as well as follow-up activity related to the information.

ITEM 5. Amend subrule 90.5(2) as follows:

90.5(2) Exclusions. Payment shall not be made for activities otherwise within the definition of case management when any of the following conditions exist:

a. The activities are an integral component of another covered Medicaid service, including but not limited to assertive community treatment (ACT).

b. to e. No change.

ITEM 6. Amend subrule 90.8(2) as follows:

90.8(2) Emergency coverage. ~~Effective October 1, 2009,~~ a A provider of case management shall have an on-call system to ensure that, in the event of an emergency, members have access to a case manager 24 hours per day, including weekends and holidays. Expectations and parameters for emergency coverage are as follows:

a. to d. No change.